PETITION FOR EX	Docket Number 700135,432						
	, 00 100. 10.	-					
(Fees pursuant to t							
Application Number 0	Filed Jur	ne 1, 2001					
For METHOD AND S' MULTIPLE ROUTER	YSTEM FOR COMMUNICAT DEVICES	TING AN INFORM	ATION PA	CKET THR	OUGH		
Art Unit				Examiner Cynthia L. Davis			
2665	nder the province of 27 CE	D 1 136(a) to outo	nd the peri				
reply in the above	nder the provisions of 37 CF identified application.						
The requested extended fee below):	ension and fee are as follows	s (check time perio			ne appropriate		
		<u>Fee</u>	Small E	ntity Fee			
One month (	37 CFR 1.17(a)(1))	\$120	\$0	60	\$		
X Two months	(37 CFR 1.17(a)(2))	\$450	\$2	25	\$ <u>450</u>		
Three month	s (37 CFR 1.17(a)(3))	\$1020	\$5	510	\$		
Four months	(37 CFR 1.17(a)(4))	\$1590	\$7	'95	\$		
Five months	(37 CFR 1.17(a)(5))	\$2160	\$10	080	\$		
Applicant claim	s small entity status. See 37	CFR 1.27.					
1 =	amount of the fee is enclosed	d.					
Payment by cre	edit card. Form PTO-2038 is	attached.					
The Director ha	as already been authorized to	charge fees in thi	is				
1	a Deposit Account.	e i titali ii		:			
1 —	hereby authorized to charge						
	overpayment, to Deposit Acc by of this sheet.	count Number 19-	<u>1090</u> . That	ve enclosed	) a		
WARNING: Infor	mation on this form may beco form. Provide credit card info	ome public. Credit ormation and author	card inform rization on	ation shoul PTO-2038.	d not be		
l am the ☐ applicar	nt/inventor.						
assignee of record of the entire interest. See 37 CFR 3.71							
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).							
X attorney	or agent of record. Registra	ation No. <u>47,435</u>					
attorney	or agent under 37 CFR 1.34	4.					
Re	gistration number if acting under	· 37 CFR 1.34	<b>-</b> ·				
	/ .						
-m	19/BNL			November	1, 2005		
_	Signature			Date			
	Timothy L. Boller				00		
1	ed or printed name	and of the entire int	•	none Numb			
Submit multiple forms if	the inventors or assignees of re more than one signature is requi	ired.	erest or thei				
SEND TO: Commissioner for Par	tents, P.O. Box 1450, Alexandria, VA 223	113-1450.		70	9350_1.DOC [04-18-01		

EXPRESS MAIL NO. EV335614798US

IPE	Effective on 12/0	8/2004.		Complete if Known								
Effective on 12/08/2004.  Pees Fursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818).			Application N	lumber	09/872,376							
FEE TRANSMITTAL			Filing Date		June 1, 2001							
NOV 0 1 2005 W for FY 2005			First Named Inventor		Mitchell T. Berg							
<u> </u>				Examiner Na	ıme	Cynthia L. D	avis					
Applicant aims			FR 1.27	Art Unit	Art Unit		2665					
TO TAL AMOUNT OF PAYMENT (\$)450				Attorney Docket No. 700135.432			· <del></del>					
METHOD OF PAYMENT (check all that apply)												
Check Credit Card Money Order Other (please identify):												
Deposit Account Deposit Account Number: 19-1090 Deposit Account Name: Seed IP Law Group PLLC												
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)												
, – -	e(s) indicated b				-	below, excep						
	-	e(s) or underpa	yments		underpaym	nents or credit	any ove	rpayments				
Warning: Information	nder 37 CFR 1		Credit card in	nformation should	not be inclu	ded on this for	n. Provide	e credit card				
information and author			Orcan cara ii	TOTTICALO.								
FEE CALCULATION	V											
1. BASIC FILING, S	SEARCH, AND	EXAMINATIO	N FEES									
FILING FEES SEARCH			CH FEES		NATION							
	1 .2				FI	EES						
:		<b>Small Entity</b>		Small Entity		Small Entity						
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee	s Paid (\$)				
Utility	300	150	500	250	200	100						
Design	200	100	100	50	130	65						
Provisional	200	100	0	0	0	0		<del></del>				
2. EXCESS CLAIM				•		-		Small Entity				
Fee Description						<u>F</u>	Fee (\$)	Fee (\$)				
Each claim over 20 (in	ncludina Reissı	ues)					50	25				
Each independent cla	-						200	100				
Multiple dependent cl	·	,					360	180				
Total Claims	Extra Cla	ims Fe	ee (\$ <u>)</u>	Fee Paid (	(\$)	Multiple	Depend	lent Claims				
32 -20 or HP		X	50 =			Fee (\$)	-	ee Paid (\$)				
HP = highest number			_			<del></del>	_					
Indep. Claims	Extra Cla		ee (\$)	Fee Paid (	(\$)							
4 -3 or HP		x	200 =	_	_							
-	_			_								
HP = highest number of independent claims paid for, if greater than 3  3. APPLICATION SIZE FEE												
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings												
under 37 CFR 1.52(	e)) the applica	tion size fee du	ie is \$250 (\$	125 for small en	itity) for each	ch additional s	50 sheets	or fraction				
thereof. See 35 U.S							- ( <b>¢</b> )	5 D-i-  (6)				
Total Sheets	Extra Shee			additional <u>50 o</u>			<u>e (\$)</u>	Fee Paid (\$)				
-100 =	<del></del>	/50 =	(round u	p to a whole nu	mber)	x _						
4. OTHER FEE(S) Fees Paid (\$)												
Non-English Specification, \$130 fee (no small entity discount)												
Other (e.g., late filing surcharge): 2 month extension of time 450												
								<del></del>				
				······································								
SUBMITTED BY			<u>,                                    </u>	intention No.		· · · · · · · · · · · · · · · · · · ·	· · · · ·					
Signature		las / 83 1		istration No. orney/Agent)	47,435	Telephone	206-62	2-4900				
Name (Print/Type)	Timothy L. E	Soller				Date	Novem	ber 1, 2005				